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APPLICATION NO.	FI	LING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
10/616,570	(07/11/2003	Earl Rossell Geddes	1342	
7590 06/01/2005			EXAMINER		
Earl Geddes				LE, HUYEN D	
43516 Scenic Lane Northville, MI 48167			ART UNIT	PAPER NUMBER	
			2643		
			DATE MAILED: 06/01/2005		

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)						
Interview Summary	10/616,570	GEDDES, EARL ROSSELL						
interview Summary	Examiner	Art Unit						
	HUYEN D. LE	2643						
All participants (applicant, applicant's representative, PTO personnel):								
(1) <u>HUYEN D. LE</u> .	(3)							
(2) Earl Geddes.	(4)							
Date of Interview: 27 May 2005.								
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]								
Exhibit shown or demonstration conducted: d)☐ Yes e)☒ No. If Yes, brief description:								
Claim(s) discussed: <u>N/A</u> .								
Identification of prior art discussed: <u>N/A</u> .								
Agreement with respect to the claims f)□ was reached. g)□ was not reached. h)☑ N/A.								
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The final rejection mailed 02/23/05 is vacated and a non-final rejection will be sent out shortly</u> .								
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)								
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.								
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required